Indiana Department of Education

SY 2016-17 Family Friendly Schools Program Application **Due November 11, 2016**

Part One

(Check all that apply) []	Public Charter [] Public Ma	agnet [] Public Traditional () Nonpublic
Official School Name		District Name	
School Mailing Address_			
	(If address is P.O. Box, also i	nclude street address)	
City	State Z	Zip Code+4 (9 digits total)	
County	School Corp Number	School Number	
Telephone ()	E-m	nail	
Web site/URL			
an Indiana Department process will be provided	of Education Family Friendly I with technical assistance.	order to be eligible for review f y School. Schools interested in o d certify that the information co	completing this
			Date
(Principal's Name and Si			
I have reviewed the requ form is accurate.	iirements of the program an	d certify that the information co	ntained on this
			Date
(Superintendent's Name	and Signature)		
I have reviewed the requ form is accurate.	uirements of the program an	d certify that the information co	ontained on this
72.			Date
(School Board President	s/Chairperson's Name and S	ignature)	

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Part Two

In 800 words or less, provide a narrative snapshot of your school. Please include the following: (1) vision and mission of school; (2) a description of your traditions, milestones, and the nature of your community and student body; and (3) summarize the school's strengths and accomplishments in the area of family and community engagement.		

Send the completed form by email or mail to:

Email- familyfriendlyschool@doe.in.gov

Address - Indiana Department of Education, Family Friendly Schools, 115 W Washington St., South Tower,

Ste 600, Indianapolis, IN 46204.